

BEFORE THE POLICE BOARD OF THE CITY OF CHICAGO

**IN THE MATTERS OF CHARGES FILED AGAINST)
POLICE OFFICER AMY B. MCGRATH,) **No. 18 PB 2941**
STAR No. 14907, DEPARTMENT OF POLICE,)
CITY OF CHICAGO,)
RESPONDENT.) **(CR No. 1074095)****

FINDINGS AND DECISION

On January 17, 2018, the Superintendent of Police filed with the Police Board of the City of Chicago charges against Police Officer Amy B. McGrath, Star No. 14907 (hereinafter sometimes referred to as “Respondent”), recommending the Respondent be discharged from the Chicago Police Department for violating the following Rules of Conduct, which set forth expressly prohibited acts:

Rule 1: Violation of any law or ordinance.

Rule 2: Any action or conduct which impedes the Department’s efforts to achieve its policy and goals or brings discredit upon the Department.

Rule 6: Disobedience of an order or directive, whether written or oral.

A hearing on these charges against the Respondent took place before Hearing Officer Jeffrey I. Cummings on September 21 and November 14, 2018. Following the hearing, the members of the Police Board read and reviewed the record of the proceedings and viewed the video-recording of the testimony of the witnesses. Hearing Officer Cummings made an oral report to and conferred with the Police Board before it rendered its findings and decision.

POLICE BOARD FINDINGS

The Police Board of the City of Chicago, as a result of its hearing on the charges, finds and

determines that:

1. The Respondent was at all times mentioned herein employed as a police officer by the Department of Police of the City of Chicago.
2. A copy of the charges filed, and a notice stating the date, place, and time the initial status hearing would be held, were personally served upon the Respondent not fewer than five (5) days before the date of the initial status hearing for this case.
3. Throughout the hearing on the charges the Respondent was represented by legal counsel. The Respondent appeared at the September 21 proceedings. The continuation of the hearing was scheduled for October 10, October 23, and October 31, but each of these proposed hearing dates was rescheduled at Respondent's request for health-related reasons. Ultimately, the continuation of the hearing was rescheduled for November 14 with both parties' consent. However, Respondent was once more physically unable to appear for the proceedings on November 14. Respondent's attorney represented that Respondent had given him her consent to proceed with the remainder of the hearing on that date in her absence. After Respondent's attorney telephoned Respondent and Respondent confirmed on the record the reason for her absence and her consent to go forward without her, the hearing proceeded and concluded on November 14.

Introduction

4. Respondent Amy McGrath has been a police officer since August 1997. Respondent has been on ordinary disability status since April 2016 due to chronic obstructive pulmonary disease (COPD).

This case arises out of sequence of events that occurred in February and March of 2015. On February 17, 2015, an anonymous caller called the Chicago Police Department's Bureau of

Internal Affairs and reported that Respondent had used cocaine and heroin and abused prescription medications for approximately 10 years. On February 23, 2015, the Bureau of Internal Affairs received a second anonymous call regarding Respondent and the unnamed caller accused Respondent of taking illegal narcotics.

After the second anonymous call, the Department ordered Respondent to appear and give a for-cause urine sample on February 26, 2015. The Department sent Respondent's urine sample to Quest Diagnostics laboratory ("Quest") for analysis. Quest has been engaged by the Department to perform urinalysis testing on urine samples provided by Department employees to detect certain prohibited substances specified by the Department. Although Quest's testing of Respondent's February 26 urine sample indicated some positive results, Quest was unable to run a complete testing panel because gas chromatography/mass spectroscopy (GC/MS) interference prevented a positive or negative result for certain substances. Because the testing results from Respondent's February 26 urine sample were abnormal, the Department ordered Respondent to provide a second for-cause urine sample.

Respondent appeared at the Department's Random Drug Testing Unit and provided her second urine sample on March 9, 2015. Officer Carol Conry observed Respondent at all times and the parties stipulated that she followed protocol to maintain a proper chain of custody for Respondent's urine sample. Quest received Respondent's March 9 urine sample and subjected it to an analysis which began with enzyme amino assay tests. These tests determined that Respondent's urine sample had presumptive positive results for morphine, opiates, oxycodone, and 6-Acetylmorphine. Quest then subjected Respondent's urine sample to GC/MS tests to confirm the initial presumptive positive results.¹ The GC/MS tests confirmed that Respondent's

¹ Quest's laboratory director, Dawn Hahn, who is an expert in the field of forensic toxicology, testified that

urine sample was positive for codeine, morphine, oxymorphone, and 6-Acetylmorphine at amounts that were above cut-off level for each substance.

Quest reported the positive results of the GC/MS tests to the Department. Sergeant Christ Tsoukalas of the Bureau of Internal Affairs then called Respondent in to make a statement regarding the allegations against her. Sgt. Tsoukalas also instructed Respondent to bring documentation (such as receipts and copies of any bottles or containers) concerning all prescription and non-prescription drugs, including vitamins and supplements, that she took 30 days prior to the date of her March 9 sample. Respondent met with Sgt. Tsoukalas for her interview on April 21, 2015. Respondent testified that she brought “everything” concerning the documentation of her medications and drugs. Respondent also brought a list of the medications that she received while she was hospitalized on February 25, 2015, for complications with her COPD. Respondent did not produce any documentation showing that she had a prescription for heroin, morphine, or codeine. Sgt. Toukalas photographed all of Respondent’s documentation and sent it to Dr. Shirley Conibear, the Department’s medical review officer, in June 2015.

Dr. Conibear is an expert in the field of toxicology, which includes how controlled substances are processed within the human body. As the Department’s medical review officer, Dr. Conibear is tasked with determining whether there is any legitimate medical explanation for a positive drug test. Prior to determining whether there was any legitimate explanation for the presence of 6-Acetylmorphine, morphine, codeine, and oxymorphone within Respondent’s March 9 urine sample, Dr. Conibear reviewed the Quest drug screen report, copies of medical records and letters from Respondent’s physicians, copies of Respondent’s pharmacy fills for the year prior to

Quest maintained a proper chain of custody over Respondent’s March 9 urine sample at all times and that the instruments that Quest used to perform the enzyme amino assay and GC/MS tests were properly calibrated.

her drug test, and Respondent's interview with Sgt. Tsoukalas.

Dr. Conibear concluded to a reasonable degree of medical certainty that there was no legitimate medical explanation for the presence of 6-Acetylmorphine in Respondent's urine sample² and that Respondent had used heroin prior to her March 9, 2015 urine sample. Dr. Conibear supported her conclusions by explaining that: (a) 6-Acetylmorphine is the first metabolite of heroin; (b) heroin breaks down into 6-Acetylmorphine within a "period of minutes" after entering the body; (c) 6-Acetylmorphine originates only from heroin, and no other substance—or combination of substances—can produce it; (d) she has never observed any substance producing a false positive for 6-Acetylmorphine; (e) heroin is never prescribed as a medication and it cannot be obtained as a medical product; and (f) if 6-Acetylmorphine is found in a urine sample, it is reasonable to assume that the donor probably used heroin within the past 24 hours.³

Dr. Conibear also concluded to a reasonable degree of medical certainty that there was no legitimate medical explanation for the presence of morphine and codeine in Respondent's urine sample. Although morphine could in theory be prescribed, Dr. Conibear noted that Respondent was allergic to morphine per her medical records and that morphine would never be prescribed to Respondent in any event because morphine suppresses respiration and Respondent has COPD. Furthermore, the presence of morphine and 6-Acetylmorphine in Respondent's urine sample suggests that the morphine resulted from heroin use because 6-Acetylmorphine (a heroin

² When a controlled substance enters the human body, it is absorbed and circulates through the bloodstream. Most substances break down into byproducts known as metabolites as they are metabolized by the body. Drug tests look for metabolites of drugs.

³ Consistent with Dr. Conibear's opinion, the United States Department of Transportation's Procedures for Transportation Workplace Drug and Alcohol Testing Programs specify that medical review officers "must not accept an assertion that there is a legitimate medical explanation for the presence of . . . 6-AM (6-Acetylmorphine) . . . in a specimen." 49 C.F.R. §40.151(g).

metabolite) breaks down into morphine within a “period of hours.” Regarding codeine, Dr. Conibear explained that although the codeine in Respondent’s system could have resulted from taking cough medicine with codeine, Respondent produced no documentation that she had a prescription for such medication. Dr. Conibear further explained that codeine is a contaminant of heroin (a drug that is not regulated for purity or composition) and that it is not “unusual or exceptional” to find codeine, morphine, and 6-Acetylmorphine together.⁴

Dr. Conibear provided her opinions regarding the positive findings from Respondent’s March 9, 2015, urine sample to the Bureau of Internal Affairs. After Sgt. Tsoukalas reviewed Dr. Conibear’s opinions, he concluded his investigation and sustained the allegations concerning Respondent’s positive tests for 6-Acetylmorphine, morphine, and codeine. The Department filed the instant charges against Respondent on January 17, 2018.

The Board is troubled by the lengthy and seemingly inexplicable delay in filing the charges in this case. The record is unclear as to when Sgt. Tsoukalas concluded his investigation and sustained the allegations against Respondent. Dr. Conibear started her medical review of the test results from Respondent’s urine sample in June 2015, reviewed Quest’s documentation package (Superintendent’s Exhibit No. 4) after it was completed in August, 2015, and sent a letter dated July 11, 2016, to Sgt. Tsoukalas to answer his questions about the medications that Respondent was using. The Superintendent has provided no explanation as to why he waited over eighteen months after Dr. Conibear sent her July 2016 letter to file the instant charges against Respondent. While the Respondent suffered no prejudice from this delay, the Board reiterates the importance of keeping delays to a minimum.

⁴ Dr. Conibear did find that there was a medical explanation for the presence of oxymorphone in Respondent’s system because Respondent was prescribed oxycodone, and oxymorphone is a metabolite of oxycodone.

Charges Against the Respondent

5. The Respondent, Police Officer Amy B. McGrath, Star No. 14907, charged herein, is **guilty** of violating Rule 1, Rule 2, and Rule 6 in that the Superintendent proved by a preponderance of the evidence the following charges:

On or about March 9, 2015, Officer Amy B. McGrath reported to the Chicago Police Department's Random Drug Testing Unit at or about 3510 South Michigan Avenue, Chicago, and submitted a urine specimen under Control Number DA157091A, which subsequently tested positive for 6-Acetylmorphine, a heroin metabolite. Officer McGrath thereby violated:

- a. Rule 1, which prohibits violation of any law or ordinance, by violating section 402 of the Illinois Controlled Substances Act (720 ILCS 570/402) when she knowingly possessed heroin, a controlled substance, on and/or prior to March 9, 2015;
- b. Rule 2, which prohibits any action or conduct which impedes the Department's efforts to achieve its policy and goals or brings discredit upon the Department; and
- c. Rule 6, which prohibits disobedience of an order or directive, whether written or oral, when she disobeyed Chicago Police Department Employee Resource E01-09, Section II-B, which prohibits the use of illegal drugs, cannabis, or non-prescribed controlled substances or the abuse of legally prescribed drugs or controlled substances by a Department member.

See the findings set forth in paragraph no. 4 above, which are incorporated here by reference.

Respondent does not dispute the accuracy of Quest's urinalysis testing of her March 9, 2015, urine sample, which shows that she tested positive for 6-Acetylmorphine. Nonetheless, Respondent asserts that she is not guilty of these charges for four reasons.

First, Respondent argues that all charges against her should be dismissed because the Department lacked just cause to subject her to the February 26 and March 9, 2015 drug tests. The Board rejects this argument. Even presuming that the anonymous calls received by the Bureau of Internal Affairs did not provide "just cause" to subject Respondent to the drug tests, the

exclusionary rule that bars the use of evidence obtained in violation of a defendant's Fourth Amendment rights in criminal proceedings does not apply in disciplinary proceedings before the Police Board. *See In re: Klincevic*, 13 PB 2846, at 1-2 (May 19, 2016), *aff'd*, *Klincevic v. McCarthy*, No. 16 CH 8322, Memorandum Opinion and Order (Ill.Cir.Ct. Aug. 28, 2017), *aff'd*, 2018 IL App (1st) 172298-U (2018).⁵ Consequently, Respondent (who did not file a formal motion to dismiss) has failed to carry her burden of establishing that the charges against her should be dismissed for this reason.

Second, Respondent denies that she has ever used or ingested heroin. However, the Board finds that Respondent's denial of heroin use is not credible. For the reasons discussed in detail above in paragraph no. 4, Dr. Conibear concluded to a reasonable degree of medical certainty that Respondent used heroin prior to her March 9, 2015, urine sample based on the presence on 6-Acetylmorphine in the sample. Since 6-Acetylmorphine (the first metabolite of heroin metabolite) is produced *only* by heroin, the only possible way that Respondent could have 6-Acetylmorphine in her urine is if she had recently ingested heroin.

Third, Respondent hypothesizes that her positive test for 6-Acetylmorphine could be explained by the possibility that one or more of the prescription opioid medications that she was taking incorporated a heroin metabolite as "filler" and she faults the Superintendent for failing to test her opioid medications to ensure that they were pure and free from heroin. Respondent's hypothesis is refuted by Dr. Conibear's testimony. Dr. Conibear testified to a reasonable degree of medical certainty that the opioids (namely, hydrocodone, oxycodone, norco, and tramadol) and the

⁵ Respondent asserts that the Board cannot rely on *Klincevic* as guidance in reaching a decision in this case because the Appellate Court issued its ruling in *Klincevic* as a Supreme Court Rule 23 order, and Rule 23 orders are non-precedential. However, the Board is relying on the precedent created by its *own* decision in *Klincevic*, which was affirmed by the Circuit Court and the Appellate Court.

other pain-relief medications that Respondent was taking were as pure as the USP (United States Pharmacopeia) requires them to be.⁶ In light of Dr. Conibear's testimony, the Board rejects the assertion that Superintendent needed to test Respondent's medication to prove their purity, and the Board gives no weight to Respondent's speculative hypothesis that the prescription opioid medications that she was taking were adulterated with heroin.

Finally, Respondent asserts that the Illinois Controlled Substances Act, 720 ILCS 570/402, requires proof that she knowingly possessed heroin and that the Superintendent has failed to meet its burden of proof because there is no evidence that anyone observed her consume heroin and no heroin was found in her possession. Regardless of whether such proof may be required to obtain a guilty verdict in a *criminal* prosecution, the Appellate Court has repeatedly held that a positive finding for a prohibited substance after a urinalysis test is sufficient to prove knowing possession of the prohibited substance under the preponderance-of-the-evidence burden of proof applicable in Police Board disciplinary proceedings. *See, e.g., Schlobohm v. Rice*, 157 Ill.App.3d 90, 96-97 (1st Dist. 1987); *Brock v. Police Board of City of Chicago*, 205 Ill.App.3d 1034, 1042 (1st Dist. 1990); *Washington v. Police Board of City of Chicago*, 257 Ill.App.3d 936, 941 (1st Dist. 1994).

In *Schlobohm*, the Appellate Court addressed this issue as follows:

All the charged violations rely entirely upon the results of plaintiff's urinalysis to prove his knowing possession of cocaine. Plaintiff asserts that the test results alone were incapable supporting a finding that he knowingly possessed cocaine. He urges that the results of a drug screening test, standing alone, are never sufficient support for finding knowing possession of a controlled substance, even when, as in the case *sub judice*, the requisite burden of proof is merely that of a preponderance of the evidence.

The criminal offense of possession of a controlled substance incorporates not only actual or constructive physical possession of the substance by the accused, but also includes an element of knowing possession. . . . Frequently, the element of knowledge is not susceptible of direct

⁶ The USP establishes documentary and physical standards for medications to ensure that they are of the appropriate identity, strength, quality, purity, and consistency. Prescription and over-the-counter medications in the United States must meet USP standards where such standards exist.

proof and may be proved by circumstantial evidence from which an inference of knowing possession may be reasonably and fairly drawn. . . . Here, plaintiff contends, no proof of such knowledge was offered and therefore no inference thereof may be drawn without at least some circumstantial underpinning. Accordingly, he argues, the element was unproved and the Board's finding was against the manifest weight of the evidence.

The Board could have considered that the presence of a controlled substance in an individual's body, while not direct evidence of knowing possession, circumstantially gave rise to an implication of prior possession which later resulted in ingestion or injection. . . . [T]he presence of the substance within plaintiff's body could have been deemed to have carried with it the clear and logical implication of prior knowledgeable possession. . . .

Plaintiff's reliance upon criminal cases requiring proof beyond a reasonable doubt of knowing possession of a drug is misplaced and those cases are inapplicable to the circumstance of this case. The present Board's conclusion cannot be viewed as manifestly erroneous. The positive results of plaintiff's drug tests are sufficient to support the Board's findings.

Schlobohm, 157 Ill.App.3d at 96-97 (citations omitted). Accordingly, Respondent's positive test for 6-Acetylmorphine—the presence of which could only be explained by recent heroin usage—is, standing alone, sufficient to prove her knowing possession of heroin.

6. The Respondent, Police Officer Amy B. McGrath, Star No. 14907, charged herein, is **guilty** of violating Rule 1, Rule 2, and Rule 6 in that the Superintendent proved by a preponderance of the evidence the following charges:

On or about March 9, 2015, Officer Amy B. McGrath reported to the Chicago Police Department's Random Drug Testing Unit at or about 3510 South Michigan Avenue, Chicago, and submitted a urine specimen under Control Number DA157091A, which subsequently tested positive for morphine. Officer McGrath thereby violated:

- a. Rule 1, which prohibits violation of any law or ordinance, by violating section 402 of the Illinois Controlled Substances Act (720 ILCS 570/402) when she knowingly possessed morphine, a controlled substance, without a valid prescription on and/or prior to March 9, 2015;
- b. Rule 2, which prohibits any action or conduct which impedes the Department's efforts to achieve its policy and goals or brings discredit upon the Department; and
- c. Rule 6, which prohibits disobedience of an order or directive, whether written or oral, when she disobeyed Chicago Police Department Employee Resource E01-09, Section

II-B, which prohibits the use of illegal drugs, cannabis, or non-prescribed controlled substances or the abuse of legally prescribed drugs or controlled substances by a Department member.

See the findings set forth in paragraph nos. 4 and 5 above, which are incorporated here by reference.

Respondent (who does not claim that she had a prescription for morphine) repeats the same arguments to defend against the charges concerning morphine as she used to defend against the charges concerning 6-Acetylmorphine and heroin. The Board rejects arguments for the reasons stated above in paragraph no. 5, and finds Respondent guilty of the charges concerning morphine.

7. The Respondent, Police Officer Amy B. McGrath, Star No. 14907, charged herein, is **guilty** of violating Rule 1, Rule 2, and Rule 6 in that the Superintendent proved by a preponderance of the evidence the following charges:

On or about March 9, 2015, Officer Amy B. McGrath reported to the Chicago Police Department's Random Drug Testing Unit at or about 3510 South Michigan Avenue, Chicago, and submitted a urine specimen under Control Number DA157091A, which subsequently tested positive for codeine. Officer McGrath thereby violated:

- a. Rule 1, which prohibits violation of any law or ordinance, by violating section 402 of the Illinois Controlled Substances Act (720 ILCS 570/402) when she knowingly possessed codeine, a controlled substance, without a valid prescription on and/or prior to March 9, 2015;
- b. Rule 2, which prohibits any action or conduct which impedes the Department's efforts to achieve its policy and goals or brings discredit upon the Department; and
- c. Rule 6, which prohibits disobedience of an order or directive, whether written or oral, when she disobeyed Chicago Police Department Employee Resource E01-09, Section II-B, which prohibits the use of illegal drugs, cannabis, or non-prescribed controlled substances or the abuse of legally prescribed drugs or controlled substances by a Department member.

See the findings set forth in paragraph nos. 4 and 5 above, which are incorporated here by reference.

Respondent asserts that she is not guilty of these charges because she had a prescription for cough syrup containing codeine. The Board does not find that Respondent's testimony on this point is credible. Prior to her interview with Sgt. Tsoukalas, Respondent was informed of the allegation that she tested positive for codeine and she was instructed to bring all documentation concerning any prescription and non-prescription medications that she was taking. Respondent produced to Sgt. Tsoukalas documentation concerning at least 38 different prescription and non-prescription medications (including cough syrup) that she had been taking. Nevertheless, Respondent admitted that she did not bring this alleged prescription for cough medicine with codeine to her Bureau of Internal Affairs interview with Sgt. Tsoukalas and she did not explain why. It defies common sense to believe that Respondent would fail to bring documentation of a prescription that would provide a legitimate medical explanation for the presence of codeine in her urine and clear her of these charges if she in fact had such a prescription. Furthermore, at another point in her testimony, Respondent testified that she brought "everything" concerning her documentation when she met with Sgt. Tsoukalas.

Respondent also relies on the same arguments to defend against the charges concerning codeine as she used to defend against the charges concerning 6-Acetylmorphine and heroin. The Board rejects these arguments for the reasons stated above in paragraph no. 5 and finds Respondent guilty of the charges concerning codeine.

Penalty

8. The Police Board has considered the facts and circumstances of the conduct of which it has found the Respondent guilty, and the evidence presented in mitigation, including the

Respondent's complimentary and disciplinary histories.

The Board has considered thoroughly the evidence the Respondent—who joined the Police Department in 1997—offered in mitigation, which includes evidence that she has a complimentary history of 11 total awards (including 4 honorable mentions) and that she has no sustained complaints on her disciplinary history. Respondent did not offer testimony from any mitigation witnesses.

Nevertheless, the Board finds that Respondent's service as a police officer and her lack of prior disciplinary history does not mitigate the seriousness of her misconduct. The Police Board determines that the Respondent must be discharged from her position for possessing and ingesting heroin, morphine, and codeine, for she engaged in the illegal use of drugs in violation of the Police Department's Rules of Conduct and the law of the State of Illinois that she swore to uphold as a Chicago police officer.

Illegal drug use by police officers is inconsistent with the goals of the Police Department, and undermines the Department's ability to carry out its mission to maintain peace and order, especially to prevent crime stemming from illegal drug use and drug dealing. The use of illegal drugs by officers increases the risk that they will not have the physical stamina and psychological stability to properly perform their job, and increases the risk that officers will become involved with a person or enterprise engaged in the illegal sale, delivery, manufacture, purchase, or possession of illegal drugs. For these reasons, “the [P]olice [D]epartment cannot condone the illegal use of drugs by its employees.” *Martin v. Thompson*, 195 Ill.App.3d 43, 50 (1st Dist. 1990) (upholding the “ultimate sanction of discharge” for the use of cocaine).

The Board finds that the Respondent's conduct is sufficiently serious to constitute a substantial shortcoming that renders her continuance in her office detrimental to the discipline and

efficiency of the service of the Chicago Police Department, and is something which the law recognizes as good cause for her no longer occupying her office.

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POLICE BOARD DECISION

The Police Board of the City of Chicago, having read and reviewed the record of proceedings in these cases, having viewed the video-recording of the testimony of the witnesses, having received the oral report of the Hearing Officer, and having conferred with the Hearing Officer on the credibility of the witnesses and the evidence, hereby adopts the findings set forth herein by the following votes:

By votes of 8 in favor (Ghian Foreman, Paula Wolff, Eva-Dina Delgado, Steve Flores, John P. O'Malley Jr., John H. Simpson, Rhoda D. Sweeney, and Andrea L. Zopp) to 0 opposed, the Board finds the Respondent **guilty** of violating Rule 1, Rule 2, and Rule 6, as set forth in paragraph nos. 5 through 7 above.

As a result of the foregoing, the Board, by a vote of 8 in favor (Foreman, Wolff, Delgado, Flores, O'Malley, Simpson, Sweeney, and Zopp) to 0 opposed, hereby determines that cause exists for discharging the Respondent from her position as a police officer with the Department of Police, and from the services of the City of Chicago.

NOW THEREFORE, IT IS HEREBY ORDERED that the Respondent, Police Officer Amy B. McGrath, Star No. 14907, as a result of having been found **guilty** of all charges in Police Board Case No. 18 PB 2941, be and hereby is **discharged** from her position as a police officer with the Department of Police, and from the services of the City of Chicago.

This disciplinary action is adopted and entered by a majority of the members of the Police Board: Ghian Foreman, Paula Wolff, Eva-Dina Delgado, Steve Flores, John P. O'Malley Jr., John H. Simpson, Rhoda D. Sweeney, and Andrea L. Zopp.

DATED AT CHICAGO, COUNTY OF COOK, STATE OF ILLINOIS, THIS 17th DAY OF JANUARY, 2018.

Police Board Case No. 18 PB 2941
Police Officer Amy B. McGrath

Attested by:

/s/ **GHIAN FOREMAN**
President

/s/ **MAX A. CAPRONI**
Executive Director

DISSENT

The following members of the Police Board hereby dissent from the Findings and Decision of the majority of the Board.

[None]

RECEIVED A COPY OF
THESE FINDINGS AND DECISION
THIS ____ DAY OF _____, 2019.

EDDIE T. JOHNSON
Superintendent of Police